

Ministry of Health of Republic of Belarus
Educational establishment “Vitebsk State order of peoples’ Friendship
Medical University”

INSTRUCTIVE DIRECTIONS
FOR POLYCLINIC PRACTICE IN THERAPY
FOR 4TH – YEAR STUDENTS OF OVERSEAS STUDENTS
TRAINING FACULTY
AND PRACTICE SUPERVISORS

Vitebsk, 2015

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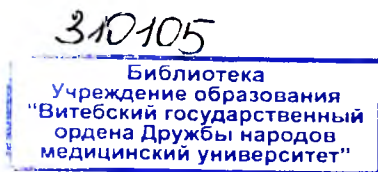
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I-68

The Instructive directions for polyclinic practice on therapy for 4th – year students of overseas students training faculty and practice supervisors are composed in conformity with the educational standard of higher education of Republic of Belarus for specialty 1-79 01 01 “General Medicine” (ОСВО РБ 1-79 01 01 – 2013) confirmed by the decision of Ministry of Health of Republic of Belarus 30.08.2013 г. № 88, the studying plan for specialty 1-79 01 01 “General Medicine” of the medical polyclinic practice in therapy for 4th-year students and the Educational program for the specialty 1-79 01 01 “General Medicine” of the medical polyclinic practice in therapy (Vitebsk, 2015).

The Instructive directions for polyclinic practice on therapy are approved on the meeting of the Chair of Polyclinic Therapy (record № 12, dated 02.02.2015). and of the Central Academic Methodical Council of the University (record № 5, dated 20.052015).

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EXPLANATORY NOTE

Medical polyclinic practice in therapy for the 4th year students of Overseas Student Training Faculty is an obligatory stage of a medical student preparation.

Students pass credit with mark and a mark is put according to the results of the practice. The students who have not passed polyclinic practice in time or have not got credit are not allowed to pass winter exams and the students who do not clear their academic debts are discharged from the university.

A student may do polyclinic practice at his parents' residence if the medical establishment of the place can provide the following conditions:

- 1) medical establishment should have all the necessary resources for qualitative mastering of practical skills according to the academic program;
- 2) medical establishment should have rights to issue required certificate in English;
- 3) daily practice records and practice diary should be certified with the signature of the practice supervisor and the seal of the medical establishment.
- 4) medical establishment should give a student preliminary consent for going practice.

The following information should be specified in the certificates obligatory:

- 1) **Quantity of hours that were worked out** (according to the program);
- 2) **List of the mastered skills and quantity of executed manipulations;**
- 3) **The certificate must be typed on the official form of medical establishment and certified with the signature of the practice supervisor and the seal of the medical establishment.**

Students fill in diary in English and state the executed work every day during the whole period of practice. To pass credit with mark on practice a student must hand his diary of polyclinic practice and the original of the certificate or its x-copy to the chair. If the certificate is not in English a student must present its notarized translation as well. Overseas students pass credit with mark on polyclinic practice according to the time-table, confirmed by the order of the Rector of the University. After these terms students are able to pass credit with mark only on paid basis.

Students who have not done polyclinic practice or present invalid documents (diary and certificate) should pass practice in Vitebsk during the autumn semester in amount of 3,5 hours per day on paid basis.

The purpose of medical polyclinic therapy practice: to perfect theoretical knowledge and practical skills in internal medicine.

The tasks of medical polyclinic therapy practice:

1. To study the principles of an ambulatory medical institutions work and the features of ambulatory care for basic internal diseases.
2. To get practical skills in the accordance with qualifying requirements of

educational standard of specialty.

3. To perfect practical skills, acquired at the chair of Polyclinic therapy during previous year.

During the practice students have to study algorithms of examination and treatment of patients with actual in ambulatory therapeutic practice disease.

Requirements to the place of practice: the practice has to be conducted at typical polyclinics or at the outpatient departments of clinics under the supervision of the Head of department and the Chief Doctor.

Duration of the practice is 108 hours (10 work days per 7.2 hours at 5-day working week and 36 hours of controlled independent work of students). A student works as an assistant of doctor of outpatient department or general practitioner for 7 days, and then he works as an assistant of specialist (cardiologist, neurologist, allergologist etc.) for 1 day, at the rehabilitation department for 1 day, at the prophylaxis department – for 1 day. If clinic has no appropriate departments a student works as an assistant of a doctor of the outpatient department or general practitioner for all practice duration.

Independent work of a student includes reading the recommended literature, making the abstract, making the presentation on sanitary and educational theme.

Mark for practice.

Rating mark for practice is formed from marks for concrete items of the whole process (maximum mark is 9). Additional points are appointed for extra work. In case of gross violation of the rules, mentioned in paragraph penalties, the points are cut. Rating mark on polyclinic therapy for the 4th year of education is considered.

Duties of a student.

A student must run the program of practice completely including:

1. Following the principles of professional ethics and deontology;
2. Fulfillment of tasks specified in program of practice;
3. Obeying the rules of internal working regulations of clinic;
4. Abiding by the rules of labor protection and occupational safety;
5. The responsible relation for the maintained work;
6. Active participating in social life of clinic;
7. Submitting of reports at a stated terms;
8. Passing of credit with mark on practice at a stated by the order term.

RECOMMENDATIONS ABOUT PERFORMANCE OF SANITARY-EDUCATIONAL WORK

During practice in therapy student must carry out 1 lecture for patients on sanitary and educational theme using multimedia presentation or video clip. The topic of multimedia presentation (about 15 slides) or video clip for patients for representation before OPD patients is coordinated with the teacher on last practical class or before the practice beginning. Presentations are represented on the credit with mark in electronic form and in printed form (4-6 slides on one page).

Recommended themes of prophylactic lectures for patients

1. Influence of passive smoking on health of adults and children.
2. How to stop to smoke?
3. Influence of smoking on health of the woman.
4. Smoking, beauty and health - whether is connection?
5. How to lower weight correctly and for a long time?
6. How to reduce or stop the alcohol use?
7. Preventive maintenance of frequent respiratory infections.
8. How to increase physical activity?
9. Physical activities - how to make their useful and to avoid harm?
10. Vitamins - pro and contra.
11. What to do at pains in a back?
12. Computer and health.
13. Risk factors of development of diseases of cardiovascular system.
14. Risk factors of development of diseases of respiratory system.
15. Risk factors of development of diseases of gastrointestinal tract.
16. Risk factors of development of diseases of liver.
17. Risk factors of development of diseases of kidney.
18. How to eat at a diabetes mellitus.
19. How to eat at a arterial hypertension and IHD.

RECOMMENDATIONS ABOUT ABSTRACT PREPARATION

The abstract volume makes about 10 pages of the typewritten text, prepared on the basis of several sources. The abstract is made out according to standard requirements and includes following sections:

- The Urgency of a stated problem.
- Basic part (diagnostics, treatment, preventive maintenance, rehabilitation and maintenance, rehabilitation and prophylactic medical examination of patients with the given disease in the conditions of a polyclinic, physical inability preventive maintenance.
- Conclusions and practical recommendations.
- The Literature.

Copying of the ready abstract from the Internet without studying and processing of various references on the presented theme does not provide rating (mark) increase. The student should answer freely the questions stated in the presented abstract.

Recommended themes of abstracts

1. Choice of drugs for an arterial hypertension treatment depending on the factor-of comorbidity.
2. Possibilities of an out-patient stage of treatment for the patients with peptic ulcer.
3. Functional dyspepsia - therapy principles.
4. Vaccination against flu. Possibilities and prospects.
5. A place of statins in the IHD treatment.
6. Consultation of smoking patients.

7. Consultation of patients with excess weight.
 8. Consultation of patients, abusing alcohol.
 9. Consultation of hypodynamic patients.
 10. Consultation of patients, having high hereditary cardiovascular risk
 11. Proper diet as an element of secondary preventive maintenance at patients with IHD.
 12. Proper diet as an element of secondary preventive maintenance at patients with AH.
- A student can choose other theme of the abstract which concerns out-patient management of patients with diseases of a therapeutic profile.

RECOMMENDED LITERATURE

The basic:

1. Бразулсвич, В.И. Поликлиническая терапия. Организация амбулаторно-поликлинической терапевтической службы. Ургентные состояния на догоспитальном этапе. 1 том: Пособие / В.И. Бразулсвич, В.П. Сиваков, З.И. Веремеева, С.И. Пиманов, В.А. Корнеева, К.Н. Егоров, О.А. Голюченко. – Витебск: ВГМУ, 2012. – 272 с. (CD)
2. Бразулевич, В.И. Поликлиническая терапия. Диагностика, лечение, диспансеризация, медико-социальная экспертиза, профилактика основных терапевтических заболеваний в амбулаторно-поликлинической практике: 2 том: Пособие / В.И. Бразулевич, В.П. Сиваков, З.И. Веремеева, С.И. Пиманов, В.А. Корнеева, К.Н. Егоров, О.А. Голюченко. – Витебск: ВГМУ, 2012. – 451 с. (CD)
3. Harrison's Principles of Internal Medicine. 18-th edition / editors: Antony S. Fauci et al. – 2012.

The additional:

1. Essentials of adult ambulatory care / Ed. L.M. Ruckler. – Baltimore: Williams and Wilkins, 1997.
2. General Propedeutics of Internal Diseases: lecture course/ VSMU, 2006.
3. Bushma K.M. Intensive Care Medicine: short textbook for English-speaking students – Grodno: GrSMU, 2010.
4. Konorev M.R. Lecture notes by internal diseases for foreign students of 5 courses of medical faculty/ Vitebsk, VSMU – 2008.
5. Global Initiative for Asthma, 2013
6. Global Initiative for Chronic obstructive Lung Disease, 2014
7. Internet-sites: www.biomednet.com, www.medscape.com, www.PubMed.com, www.BMJ.com.

REQUIREMENTS FOR FILLING IN A WORKING DIARY ON THERAPY.

1. At the beginning of the diary a student should write the status of the hospital (capacity, service area, quality factors of work of clinic for the last year).
2. A student should record into the diary his daily work with its exact description, reflecting the personal involvement in treatment process (sanitary-educational, participation in treatment of patients at home etc.)
3. Diary should be filled in a proper scheme with a patient's name, age, brief history of the disease, results of the examination, full diagnosis (nosological but not syndromal) and treatment plan with indication of medicines doses.
4. A student has to describe 4 patients a day or more. Patients with different diagnoses should be chosen for description.
5. Diary has to be signed and stamped by a doctor. At least once a week it should be certified by the Head of the Outpatient Department.
6. At the end of the diary student writes a report about the practice and summarized the acquisition practice skills.
7. The final report is signed by the student, the Head of the Department and the Chief Doctor. The report should be stamped with the hospital stamp.
8. Diary is ended with a characteristic of the student's work at the practice which is signed by the Head of the Department and the Chief Doctor and should be stamped with the hospital stamp.
9. A mark for the practice is put into a student's diary on base of the credit with mark in accordance with the order or the University.

Example of page

Date	Content of work
8.07. 201_ 8.00- 15.00	<p>Worked as assistant of general practitioner. Conducted reception of 16 patients.</p> <p>1. Patient G., (fe)male, ____ years old.</p> <p>Complaints _____</p> <p>An. morbi _____</p> <p>General state of the patient _____</p> <p>Skin integument, visible mucous membranes characteristic _____</p> <p>Weight, constitution, edemas _____</p> <p>Lymph nodes _____</p> <p>Tongue, fauces, tonsils _____</p> <p>Thyroid gland, mammary glands _____</p> <p>Joints _____</p> <p>Respiratory rate _____. Vesicular (or other) respiration, breath sounds, rales _____. Dullness on percussion _____</p> <p>Heart rate _____, pulse, heart sounds, murmurs characteristic, arrhythmia. Blood pressure _____.</p> <p>Abdomen (soft, distended, tense etc.), pain characteristic and localization on palpation. Liver characteristic _____</p> <p>Stool characteristic _____</p> <p>Urination characteristic _____</p> <p>Diagnosis (IDC X) _____</p> <p>Examinations _____</p> <p>Treatment (remedies in form of prescriptions): _____</p> <p>2. Emergency care for hypertensive crisis was given for the patient R., 42 years old, male.</p>
	Signature of a student
	Signature and seal of the Doctor

RECOMMENDED PRACTICAL SKILLS FOR THE PERIOD OF OUTPATIENT PRACTICAL TRAINING ON THERAPY:

№	Practical skills	Recommended		Result	
		quantity	level of mastering	quantity	level of mastering
1.	Patients examined at OPD	100	2		
2.	Patients examined of at home	20	2		
3.	Filling of medical cards	80	2-3		
4.	Blood pressure measurement	40	3		
5.	Registered electrocardiograms	10	2-3		
6.	Interpreted electrocardiograms	50	2-3		
7.	Preparation of individual rehabilitation programs (internal diseases)	5-8	2-3		
8.	Preventive medicine - lecture	1-2	3		
9.	Filling of prescriptions (internal diseases)	20	2-3		
10.	Rendering of the urgent aid at a pre-hospital stage (in case of hypertensive crisis, an acute coronary syndrome, allergic conditions, a collapse, a bronchial asthma attack)	10	2		
11.	Other kinds of work				

Note: levels of mastering.

1 – To know the theory, be oriented professionally (corresponds to knowledge).

2 – To know theoretically, to take part in patient's examination, treatment, assist (corresponds to skills).

3 – To know theoretically, to act independently (corresponds to skills).

Activities to promote healthy lifestyles

Date	Title of lecture and conversations	Number of attendees	Signature

CHARACTERISTICS

Rules of the internal labor order _____

Level of theoretical preparation _____

Mastering of practical skills minimum _____

Attitude to duties _____

Knowledge of prescriptions of the most used medicines _____

Observation of deontological norms _____

Relations with patients _____

Participation in social life of community _____

Discipline _____

Communication _____

Personal qualities _____

Interests _____

Remarks _____

Mark _____

Chief Doctor _____

The instructor _____

Stamp

ASSESSMENT CRITERIA FOR CREDIT WITH MARK

The results of practice are assessed on 10-grade system. While assessing for credit with mark rating mark resulted in practical classes on the 4th course is taken.

Rating mark by results of practice is calculated as arithmetical mean value of the marks a student got in the following divisions of practical preparation:

1. Skill to interpret of ECG, laboratory, X-ray and instrumental investigations.
2. Skill to formulate diagnoses.
3. Skill to prescribe treatment and write out prescriptions.
4. Skill to render the emergence aid in acute coronary syndrome, cardiac and bronchial asthmas, hypertensive crisis, sudden loss of consciousness of different etiology, renal colic, convulsive disorder.
5. Ability to give a patient recommendation on taking medicines, meals, lifestyle changing (for smokers, those who suffer from overweight, alcohol consumption etc.); skills of educative activities and presented materials concerned this division of preparation.
6. Skills to carry out medical manipulations provided by the program of practice.
7. The quality of presented abstract (a student should be well-informed in provided theme and be able to answer an examiner's questions).

The mark can be improved for 1 grade for responsible attitude to the duties, diligence, and attention to patients, communicativeness, and discipline on the basis of excellent references from the place of practice.

The mark can be lowered for 1 grade because of missing and late for practical classes without reasonable excuse, slovenly appearance, lack of discipline, violation of ethics and deontology.

If a student hasn't completed the program of practice, has received negative feedback about his work, has not mastered the practical skills, not given answers to the questions during the set-off depending on the degree of violation 3, 2 or 1 grade can be given. In this case a student is directed at re-working out of the practice or its parts.

If excellent result on practice, summary and educative activity the Head of the chair can apply to the University administration about a student's awarding.

Information about the final rating assessments for polyclinic therapy is given to the State Examination Committee on therapy and taken into account when the recommendations of students for the Master course.

INFORMATION FOR STUDENTS

Main documentation for passing practice is available on the web-site of VSMU www.vgmu.vitebsk.by in the section "practice". E-mail for letters to practice supervisors at VSMU chairs – vgmu-practica@hotmail.com. If you want your letter to come to your practice supervisor you must obligatory specify in the theme of the letter the following information: your specialty (OSTF), your course number, practice subject (therapy).

QUESTIONS FOR PREPARATION FOR THE CREDIT WITH MARK

1. The organization of the out-patient-polyclinic care to adult population.
Principles of the organization of work of a polyclinic.
2. Duties of general practitioner.
3. Preventive work of the general practitioner: kinds of preventive actions.
4. The concept of risk factors: kinds of risk factors.
5. Risk factors of development of ischemic heart disease, preventive maintenance, prophylactic medical examination, rehabilitation.
6. Risk factors of development of an arterial hypertension, preventive maintenance, prophylactic medical examination, rehabilitation.
7. Risk factors of development of diseases of the respiratory system, preventive maintenance, prophylactic medical examination, rehabilitation.
8. Risk factors of development of diseases of the gastrointestinal tract, preventive maintenance, prophylactic medical examination, rehabilitation.
9. Risk factors of development of diseases of bile ducts and gallbladder, preventive maintenance, prophylactic medical examination, rehabilitation.
10. Risk factors of development of diseases of kidneys, preventive maintenance, prophylactic medical examination, rehabilitation.
11. Population prophylactic medical examination: groups of observation, prophylactic medical examination kinds.
12. Structure of the out-patient individual medical card.
13. Continuity of polyclinic and hospital medical care, a rule of filling in direction for hospitalization.
14. Criteria of temporary and permanent (lasting) disability.
15. To write out prescriptions on preparations of the basic groups applied to treatment of acute respiratory infections, tonsillitis.
16. To write out prescriptions on preparations of the basic groups applied to treatment of acute bronchitis, pneumonia.
17. To write out prescriptions on preparations of the basic groups applied to treatment of an arterial hypertension.
18. To write out prescriptions on preparations of the basic groups applied to treatment of a stable angina.
19. To write out prescriptions on preparations of the basic groups applied to treatment of functional dyspepsia.
20. To write out prescriptions on preparations of the basic groups applied to treatment of chronic gastritis.
21. To write out prescriptions on preparations of the basic groups applied to treatment of peptic ulcer of a stomach and duodenum.

Questions on rendering of the urgent aid at a pre-hospital stage

1. Rendering of the urgent help and medical tactics at not complicated and complicated hypertensive crisis.
2. Concept of an acute coronary syndrome, tactics of the doctor, urgent aid.
3. Rendering of the urgent aid and medical tactics at a stenocardia attack.
4. Rendering of the urgent aid and medical tactics at acute heart failure.

5. Rendering of the urgent aid and medical tactics at an attack of a bronchial asthma and the developing asthmatic status.
6. Rendering of aid at a feverish syndrome.
7. Rendering of the urgent aid, medical tactics at «acute abdomen».
8. Rendering of aid at urgent allergic conditions: anaphylactic shock, Quince's edema, urticaria.
9. Rendering of the urgent aid at arrhythmia (atrial fibrillation, flutter, supraventricular and ventricular tachycardia).

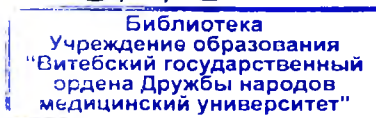
Questions on the presented diary

1. Questions on tactics of management and treatment of patients with the most widespread diseases of inner organs in the out-patient conditions.
2. Questions on classification and the formulation of clinical diagnoses of the most widespread diseases of therapeutic profile.

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по производственной врачебной поликлинической практике по терапии
для студентов IV курса ФПИГ и руководителей практики

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